PAGE 1 / 20

Image# 201508139000821176

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3X	or Other 1	Γhan An Auth	orized Comn	nittee		Office Use Only
1. NAME OF COMMITTEE (in full)	YPE OR PR	RINT ▼	Example: If over the line		12FE4M5	5
Hawaii Republican Part	у					ı
ADDRESS (number and street)	725 Kapiola	ani Boulevard				
Check if different	Suite 105					
than previously reported. (ACC)	Honolulu				HI	96813-6027
2. FEC IDENTIFICATION NUI	MBER ▼	CITY	Y A		STATE A	ZIP CODE ▲
C C00085506		3. IS RE	THIS EPORT	NEW (N) OR	× Al	MENDED .)
4. TYPE OF REPORT (Choose One)	(b) Month Repor	t L	20 (M2)	May 20 (M5) Aug	20 (M8) Nov 20 (M11) (Non-Election Year Only)
(a) Quarterly Reports:		Mar 2	20 (M3)	Jun 20 (M6)	H	Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Report (Q1	,	Apr 2	20 (M4) ×	Jul 20 (M7)	Oct	20 (M10) Jan 31 (YE)
July 15	(C) 1	2-Day PRE-Election	Primary	(12P)	General	(12G) Runoff (12R)
Quarterly Report (Q2 October 15	´ F	Report for the:	Conventi	on (12C)	Special	(12S)
Quarterly Report (Q3 January 31 Year-End Report (YE		Election	n on	/ D D /	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 3	80-Day POST-Election Report for the:	General	(30G)	Runoff (30R) Special (30S)
Termination Report (TER)		Election	n on	/ D D /	Y Y Y Y Y	in the State of
5. Covering Period 06	01	2015	throu	gh 06	30	2015
I certify that I have examined this	Report and	d to the best of r	my knowledge a	nd belief it is t	rue, correct an	d complete.
Type or Print Name of Treasurer	GWEN HO	NJO				
Signature of Treasurer GWEN	HONJO		[Electron	ically Filed]	Date 08	M / D D / Y Y Y Y Y Y 2015
NOTE: Submission of false, erroned	ous, or incom	nplete information	may subject the	person signing	this Report to t	the penalties of 2 U.S.C. §437g.
Office Use Only						FEC FORM 3X Rev. 12/2004

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Hawaii Republican Party 06 2015 06 30 2015 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 72964.44 January 1, 2015 (b) Cash on Hand at 75716.5 Beginning of Reporting Period..... 119448.68 2282.71 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 77999.21 192413.12 6(a) and 6(c) for Column B)..... 9715.26 124129.17 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 68283.95 68283.95 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 0 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Hawaii Republican Party	Hawaii	Repub	lican	Partv
-------------------------	--------	-------	-------	-------

Report Covering the Period: From: 06	01 2015 To	: 06 30 2015
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Contributions (other than loans) From:		
(a) Individuals/Persons Other		
Than Political Committees	616.96	74613.81
(i) Itemized (use Schedule A)	010.30	14010.01
(ii) Unitemized	719.95	32478.67
(iii) TOTAL (add	7 10.00	
Lines 11(a)(i) and (ii)▶	1336.91	107092.48
2.1100 11(4)(1) 4.114 (1)		
(b) Political Party Committees	0	0
(c) Other Political Committees		
(such as PACs)	0	C
(d) Total Contributions (add Lines		
11(a)(iii), (b), and (c)) (Carry	4000.04	107092.48
Totals to Line 33, page 5)	1336.91	10/092.40
2. Transfers From Affiliated/Other		0
Party Committees	0	
. All Loans Received	0	0
Loan Repayments Received	0	
5. Offsets To Operating Expenditures		
(Refunds, Rebates, etc.)	0	387.81
(Carry Totals to Line 37, page 5)		307.01
to Federal Candidates and Other		
Political Committees	0	0
7. Other Federal Receipts		
(Dividends, Interest, etc.)	1.16	20.45
. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account		
(from Schedule H3)	944.64	11947.94
(b) Levin Funds (from Schedule H5)	0	0
=		
(c) Total Transfers (add 18(a) and 18(b))	944.64	11947.94
Total Receipts (add Lines 11(d),	2002 74	440440.00
12, 13, 14, 15, 16, 17, and 18(c))▶	2282.71	119448.68
D. Total Federal Receipts		
(subtract Line 18(c) from Line 19)▶	1338.07	107500.74

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B			
. Operating Expenditures:	iotal fills Feriod	Calendar Year-to-Date			
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)					
(i) Federal Share	531.36	6720.73			
	044.64	14047.04			
(ii) Non-Federal Share	944.64	11947.94			
(b) Other Federal Operating Expenditures	8239.26	99460.5			
(c) Total Operating Expenditures					
(add 21(a)(i), (a)(ii), and (b))►	9715.26	118129.17			
Transfers to Affiliated/Other Party					
CommitteesContributions to	0				
Federal Candidates/Committees and Other Political Committees	0	0			
Independent Expenditures	7				
(use Schedule E)	0	0			
Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)					
(use Schedule F)	0	0			
Loan Repayments Made	0	0			
Loan Hepayments Made					
Loans Made	0	0			
Refunds of Contributions To: (a) Individuals/Persons Other					
Than Political Committees	0	0			
(h) Political Party Committees	0	0			
(b) Political Party Committees(c) Other Political Committees					
(such as PACs)	0	0			
(d) Total Contribution Refunds					
(add Lines 28(a), (b), and (c))▶	0	0			
(****					
Other Disbursements	0	0			
Federal Election Activity (2 U.S.C. §431(20))					
(a) Allocated Federal Election Activity					
(from Schedule H6)	0	0			
(i) Federal Share	0				
(ii) "Levin" Share	0	0			
(b) Federal Election Activity Paid Entirely					
With Federal Funds	0	6000			
(c) Total Federal Election Activity (add					
Lines 30(a)(i), 30(a)(ii) and 30(b))▶	0	6000			
Total Disbursements (add Lines 21(c), 22,					
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	9715.26	124129.17			
Total Federal Disbursements					
(subtract Line 21(a)(ii) and Line 30(a)(ii)					
from Line 31)	8770.62	112181.23			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	1336.91	107092.48
4. Total Contribution Refunds (from Line 28(d))	0	0
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1336.91	107092.48
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	8770.62	106181.23
7. Offsets to Operating Expenditures (from Line 15, page 3)	0	387.81
8. Net Operating Expenditures (subtract Line 37 from Line 36)	8770.62	105793.42

: 97 'A = G7 9 @ G B9 CI G'H9 LH F 9 @ 5 H9 8 'HC '5 'F 9 DC F HZ G7 < 98 I @ 'C F '+ H9 A = N5 H= C B

Form/Schedule:	F3XA
Transaction ID:	

Additional Notes With Regards to H3

Transfers _______ 6/4/2015 transfer for \$944.64: Allocation from State to Federal ______

Form/Schedule: F3XA Transaction ID:

Amend to correct timing difference. June Amended report filed for H4 adjustment after July report filed

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

20

14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Hawaii Republican Party Full Name (Last, First, Middle Initial) Eric HL Ching Date of Receipt Mailing Address 1319 Ala Alii Street 2015 03 City State Zip Code Transaction ID: 136786-107453-i Honolulu HI 96818-1858 Amount of Each Receipt this Period FEC ID number of contributing C 8.01 federal political committee. In-Kind:In Kind - Water for Office Name of Employer Occupation CC Repair & Maintenance Svc President Receipt For: Aggregate Year-to-Date ▼ Primary General 724.06 Other (specify) Full Name (Last, First, Middle Initial) B. Marcia J Klompus Date of Receipt Mailing Address PO Box 2119 06 23 2015 City State Zip Code Transaction ID: 110742-107463-c HI Honolulu 96805-2119 Amount of Each Receipt this Period FEC ID number of contributing 100 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 600 Other (specify) Full Name (Last, First, Middle Initial) c. Philip D Hellreich M.D. Date of Receipt Mailing Address 225 Kuuhoa Place 06 23 2015 City State Zip Code Transaction ID: 123976-107458-c HI Kailua 96734-2734 Amount of Each Receipt this Period FEC ID number of contributing 100 С federal political committee. Name of Employer Occupation Kailua Dermatology Assoc Ltd Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 600 Other (specify) 208.01 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FO	R LINE	NU	IMBER	:	PAGE	8	OF	20
(che	eck only	or or	ne)					
×	11a		11b		11c	12	!	
	13		14		15	16	;	17

	Statements may not be sold or used by any person e name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
Hawaii Republican Party		
Full Name (Last, First, Middle Initial) A. Katherine H Thomason Mailing Address 44-166 Nanamoana Street		Date of Receipt
		06 23 2015
City	State Zip Code	Transaction ID: 134228-107457-c
Kaneohe	HI 96744-2557	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	100
Name of Employer	Occupation	
IMS LLC	Accountant	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 2210	
Full Name (Last, First, Middle Initial) Johnny M McElree		Date of Receipt
Mailing Address 69-1000 Kolea Kai Circle		M M / D D / Y Y Y Y
Unit 7E City	State Zip Code	06 23 2015
Waikoloa	HI 96738-6714	Transaction ID : 30687-107459-c Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50
Name of Employer Century 21 All Islands	Occupation Realtor	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350	
Full Name (Last, First, Middle Initial) C. Marcia S. Anderson		Date of Receipt
Mailing Address 98-500 Koauka Loop Apt. 9B		06 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Aiea	State Zip Code HI 96701-5802	Transaction ID : 3477-107461-c
FEC ID number of contributing federal political committee.	C 96701-3802	Amount of Each Receipt this Period 8.95
Name of Employer	Occupation	
Surface Prep & Coating Tech	Self-employed contractor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	353.7	
SUBTOTAL of Receipts This Page (optional)		158.95
TOTAL This Period (last page this line number	only)	7

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 9 Use separate schedule(s) (check only one) X 11a 11b 11c

OF

20

for each category of the 12 Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Hawaii Republican Party Full Name (Last, First, Middle Initial) Andres E. Mukk Date of Receipt Mailing Address 95-1031 Kahakiki Street 2015 24 City Zip Code State Transaction ID: 129167-107469-c Mililani HI 96789-6500 Amount of Each Receipt this Period FEC ID number of contributing C 25 federal political committee. Name of Employer Occupation Booz Allen Hamilton Defense Analyst Receipt For: Aggregate Year-to-Date ▼ Primary General 300 Other (specify) Full Name (Last, First, Middle Initial) B. Mark A. Torreano Date of Receipt Mailing Address 343 Hobron Lane Apt. L101 06 24 2015 City State Zip Code Transaction ID: 134357-107466-c HI Honolulu 96815-5802 Amount of Each Receipt this Period FEC ID number of contributing 25 federal political committee. Name of Employer Occupation Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 1050 Other (specify) Full Name (Last, First, Middle Initial) **c.** Vincent Faggioli Date of Receipt Mailing Address 95-200 Anuanu Place 06 24 2015 City State Zip Code Transaction ID: 136039-107468-c HI Mililani 96789-5576 Amount of Each Receipt this Period FEC ID number of contributing 100 С federal political committee. Name of Employer Occupation **US Army** Civilian Employee Receipt For: Aggregate Year-to-Date ▼ Primary General 600 Other (specify) 150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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SCHEDULE A (FEC Form 3X)

FOR LINE NUMBER: PAGE 10 OF

TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Reports and S or for commercial purposes, other than using the		erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Hawaii Republican Party		
Full Name (Last, First, Middle Initial) Janice M. Hellreich Mailing Address 225 Kuuhoa Place City Kailua FEC ID number of contributing federal political committee. Name of Employer Self-Employed Receipt For: Primary General Other (specify)	State Zip Code HI 96734-2734 C Occupation Speech Pathologist Aggregate Year-to-Date ▼ 2150	Date of Receipt M M
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee.	State Zip Code	Date of Receipt M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
Name of Employer Receipt For: Primary General Other (specify) ▼	Occupation Aggregate Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mailing Address City FEC ID number of contributing federal political committee. Name of Employer Receipt For: Primary General Other (specify)	State Zip Code C Occupation Aggregate Year-to-Date ▼	Date of Receipt M M M / D D / Y Y Y Y Y Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)		100.00
TOTAL This Period (last page this line number	only)	616.96

SCHEDULE B (FEC Form 3X)	Hee concrete activities	-	FOR LINE NUMBER: PAGE 11 OF 20						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)						
	Detailed Summary Page	27	28a 28b	28c 29 30					
Any information copied from such Reports and Statem									
or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)	e and address of any politic	ai committee to	SOIICIT CONTRIBUTIONS	from such committee.					
Hawaii Republican Party									
Full Name (Last, First, Middle Initial)			Data of Diahuwaan	mont					
A. AOAO Imperial Plaza			Date of Disburser						
Mailing Address 711 Kapiolani Boulevard Suite 700			06 01						
,	State Zip Code		Transaction ID :	: SB21B105368107400e					
Honolulu Purpose of Disbursement	HI 96813-5249								
Maintenance & Utilities		001	Amount of Each I	Disbursement this Period					
Candidate Name		Category/		2708.14					
Office County		Туре		2700.14					
Office Sought: House Disburser Senate	nent For: Primary General								
	Other (specify)								
State: District:									
Full Name (Last, First, Middle Initial)									
B. Axia Bankcard Merchant			Date of Disburser						
Mailing Address 1311 Kapiolani Boulevard Suite 512			06 02						
•	State Zip Code		Transaction ID	: SB21B136123107396e					
Honolulu Purpose of Disbursement	HI 96814-4558								
Merchant Services		001	Amount of Each I	Disbursement this Period					
Candidate Name		Category/ Type	,	88.71					
Office Sought: House Disbursem									
	Primary General								
State: District:	Other (specify) ▼								
Full Name (Last, First, Middle Initial)									
C. Hawaiian Telcom			Date of Disburser	ment					
Mailing Address 711 Kapiolani Boulevard			M M / D 02						
City	State Zip Code		Transaction ID	: SB21B105420107399e					
Honolulu	HI 96813-5237		Transaction ID	. 302161034201073996					
Purpose of Disbursement Administrative/Salary/Overhead: Telehone		001	American of Foods 1	Diah					
Candidate Name		Category/ Type	Amount of Each I	Disbursement this Period 28.43					
	nent For: Primary General Other (specify)								
State: District:	(-1: 3 / ♥								
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			7	2825.28					

SCHEDULE B (FEC Form 3X)	Lloo paparata salas dilitata	-	INE NUMBER: PAGE 12 OF 20						
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only	22 23	24 25 26					
		27	28a 28b	28c 29 30					
Any information copied from such Reports and Sta or for commercial purposes, other than using the									
NAME OF COMMITTEE (In Full)									
Hawaii Republican Party									
Full Name (Last, First, Middle Initial)									
^{A.} Mailchimp			Date of Disbursem						
Mailing Address 675 Ponce De Leon Avenue NE	<u> </u>		06 02	2015					
Suite 5000 City	State Zip Code								
Atlanta	GA 30308-1829		Transaction ID :	SB21B-135909-507-V					
Purpose of Disbursement	3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3								
: Reimburse - E-Mail Distribution			Amount of Each Di	isbursement this Period					
Candidate Name		Category/		130					
000		Type		130					
Office Sought: House Disbut	rsement For: Primary General		[MEMO ITEM]						
Senate President	Primary General Other (specify) ▼		Subitemization of Ro	obert Hickling (06/02/15					
State: District:	oution (specify) ▼								
Full Name (Last, First, Middle Initial)									
B. Oceanic Time Warner Cable			Date of Disbursem	ent					
			M M / D D	/ Y Y Y Y Y					
Mailing Address PO Box 30050			06 02	2015					
City	State Zip Code		Transaction ID :	SB21B105782107398e					
Honolulu Purpose of Disbursement	HI 96820-0050								
Administrative/Salary/Overhead: Cable		001	Amount of Each Di	isbursement this Period					
Candidate Name		Category/	2 2001 51						
		Type		233.7					
Office Sought: House Disbut	rsement For:								
Senate	Primary General								
President	Other (specify) ▼								
State: District:									
Full Name (Last, First, Middle Initial)			Date of Disbursem	ent					
C. Sprint				_					
Mailing Address PO Box 219100			06 / 02	2015					
City	State Zip Code		Transaction ID ·	SB21B106033107397e					
Kansas City Purpose of Disbursement	MO 64121-9100								
Telephone		001							
Candidate Name			Amount of Each Di	isbursement this Period					
Caradate Hame		Category/ Type		18.89					
Office Sought: House Disbut	rsement For:	71							
Senate	Primary General								
President	Other (specify) ▼								
State: District:									
				050.50					
SUBTOTAL of Disbursements This Page (optional	al)	·····•	7	252.59					
TOTAL TI: D : 1/4 :	1.)								
TOTAL This Period (last page this line number o	nly)			1 40 1 40 1					

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SCHEDULE B (FEC Form 3X)	11	FOR LINE	FOR LINE NUMBER:				F 20
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)				
	Detailed Summary Page	X 21b 27	22 28a	23 28b	24 28c	25 29	26 30b
Any information copied from such Reports and Stater	I nents may not be sold or us						
or for commercial purposes, other than using the name							
NAME OF COMMITTEE (In Full)							
Hawaii Republican Party							
Full Name (Last, First, Middle Initial)			Date of Dia	hurcomon			
A. Eric HL Ching			Date of Dis	bursemen		Y	V
Mailing Address 1319 Ala Alii Street			06	03		015	T
,	State Zip Code		Transactio	on ID : SB	21B1367	86107	453i
Honolulu Purpose of Disbursement	HI 96818-1858						
Inkind: In Kind - Water for Office			Amount of I	Each Disb	ursemen	t this P	eriod
Candidate Name		Category/				8	.01
Office Sought: House Disburser	nent For:	Type		,	7	J.	· .
Senate Disburser	Primary General						
President	Other (specify) ▼						
State: District:							
Full Name (Last, First, Middle Initial) B. Integrated Business Solutions Inc.			Date of Dis	hureaman	ŧ		
B. Integrated Business Solutions Inc			M M /	D		Y	Υ
Mailing Address 99-1046 Iwaena Street			06	04		015	
•	State Zip Code		Transaction	on ID : SB	321B1365	71107	428e
Aiea Purpose of Disbursement	HI 96701-3250						
Copy Overage		001	Amount of I	Each Disb	ursemen	t this P	eriod
Candidate Name		Category/ Type		,	7	68	.82
Office Sought: House Disburser	nent For:						
Senate	Primary General						
President State: District:	Other (specify) ▼						
Full Name (Last, First, Middle Initial)							
C. American Express			Date of Dis	bursemen	t		
Mailing Address PO Box 01			06 /	05		015	Υ
Maining Address PO BOX UT			UU	υσ		010	
,	State Zip Code		Transaction	on ID : SB	321B1049	25107	430e
Los Angeles Purpose of Disbursement	CA 90096-8000						
Merchant Services		001	Amount of I	Each Disb	ursemen	t this P	eriod
Candidate Name		Category/				10.	91
Office Sought: House Disburser	nent For:	Type		,	7	10.	.51
Senate Dispurser	Primary General						
President	Other (specify) ▼						
State: District:							
OUDTOTAL of Disharana is Till Disharana			· · ·			87.	74
SUBTOTAL of Disbursements This Page (optional)		······			7	37.	-
TOTAL This Period (last page this line number only)							

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 14 OF			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 23 28a 28b	24 25 2 28c 29 3	
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam					
NAME OF COMMITTEE (In Full) Hawaii Republican Party	e and address of any politic	er committee to	Solicit Contributions 1	Tom such committee.	
Full Name (Last, First, Middle Initial)			Data of Dialouseass		
A. Blakely C Parsons			Date of Disbursem		
Mailing Address 2154 Makanani Drive			06 05	2015	
Honolulu	tate Zip Code HI 96817-2034		Transaction ID :	SB21B116032107395e	
Purpose of Disbursement Administrative/Salary/Overhead: Salary		001	Amount of Each D	hisbursement this Period	
Candidate Name		Category/ Type		786.01	
President	nent For: Primary General Other (specify) ▼	1,500			
State: District: Full Name (Last, First, Middle Initial) B. Integrated Business Solutions Inc			Date of Disbursem		
Mailing Address 99-1046 Iwaena Street			06 08	2015	
Aiea	tate Zip Code HI 96701-3250		Transaction ID :	SB21B136571107431e	
Purpose of Disbursement Copy Overage		001	Amount of Each D	Sisbursement this Period	
Candidate Name		Category/ Type		86.85	
	nent For: Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) C. Axia Bankcard Merchant			Date of Disbursem		
Mailing Address 1311 Kapiolani Boulevard Suite 512			06 11	2015	
Honolulu	tate Zip Code HI 96814-4558		Transaction ID :	SB21B136123107432e	
Purpose of Disbursement Merchant Services Candidate Name		001	Amount of Each D	isbursement this Period	
		Category/ Type		13.9	
	nent For: Primary General Other (specify) ▼				
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).				886.76	

SCHEDULE B (FEC Form 3X)	Liee congrete cohodulat	(a) I	FOR LINE NUMBER: PAGE 15 OF			
ITEMIZED DISBURSEMENTS	Use separate schedule for each category of the Detailed Summary Page	e Concor only	7 one) 22 23 28a 28b	24 25 2 28c 29 3		
Any information copied from such Reports and State or for commercial purposes, other than using the na						
NAME OF COMMITTEE (In Full) Hawaii Republican Party	ine and address of any po	mical committee to	Solicit Contributions	nom such committee.		
Full Name (Last, First, Middle Initial)			D : (D:)			
A. Bank Of Hawaii			Date of Disbursen			
Mailing Address PO Box 2900			06 15			
City Honolulu	State Zip Code HI 96846-0001	_	Transaction ID :	SB21B-4-107436-e		
Purpose of Disbursement Bank Services		001	Amount of Each D	Disbursement this Period		
Candidate Name		Category/ Type		35.3		
Office Sought: House Senate President Disburse	ement For: Primary					
State: District:						
Full Name (Last, First, Middle Initial) 3. EFTPS			Date of Disbursen			
Mailing Address PO Box 173788			06 15			
City Denver	State Zip Code CO 80217-3788		Transaction ID :	SB21B105225107433e		
Purpose of Disbursement Federal Payroll Tax		001	Amount of Each D	Disbursement this Period		
Candidate Name		Category/ Type		1550.64		
Office Sought: House Senate President State: Disburse	ement For: Primary General Other (specify) ▼					
Full Name (Last, First, Middle Initial) - Hawaii State Tax Collector - SWT			Date of Disbursen			
Mailing Address PO Box 3827			06 15			
City Honolulu Purpose of Disbursement	State Zip Code HI 96812-3827		Transaction ID :	SB21B105393107434e		
State Payroll Tax Candidate Name		001 Category/	Amount of Each D	Disbursement this Period		
Office Cought	amount Form	Type	,	352.48		
Office Sought: House Senate President State: Disburse	ement For: Primary General Other (specify) ▼					
<u> </u>				1938.42		
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only		<u> </u>		1938.42		

Llea sanarata schadula(s)	FOR LINE NUMBER: PAGE 16 OF 20			
for each category of the	(check only one) X 21b 22 23 24			
Detailed Summary Page	27	28a 28b	24 25 26 28c 29 30	
nents may not be sold or use	ed by any perso		soliciting contributions	
		Date of Disbursem	nent	
		M M / D D		
		06 18	2015	
State Zip Code		Transaction ID :	CD24D404024407449a	
NV 89016		Transaction ID:	3B21B104934107446e	
	001	Amount of Each D	isbursement this Period	
	Type		43.99	
- · · · · · · · · · · · · · · · · · · ·				
		Date of Disbursem	nent	
		M M / D D D		
		22	2010	
		Transaction ID :	SB21B115752107450e	
IA 50368-9020				
	001	Amount of Each D	Disbursement this Period	
	Category/		191.38	
	Туре		191.38	
•				
		06 25		
·		Transaction ID:	SB21B-4-107477-e	
30040-0001				
	001	Amount of Each D	Disbursement this Period	
	Category/		30.46	
ment For:	Туре	7	55.15	
Primary General				
Other (specify) ▼				
	'		265.02	
	······•		265.83	
	Detailed Summary Page ments may not be sold or use ne and address of any political State Zip Code NV 89016 The ment For: Primary General Other (specify) The ment For: The ment For:	Use separate schedule(s) for each category of the Detailed Summary Page ments may not be sold or used by any persone and address of any political committee to separate schedule(s) ment For: Primary General Other (specify) General Other (speci	Use separate schedule(s) for each category of the Detailed Summary Page Transaction ID: Category/ Type	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	-	PAGE 17 OF 20	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 23 28a 28b	24 25 26 28c 29 30b	
Any information copied from such Reports and Statem or for commercial purposes, other than using the name					
NAME OF COMMITTEE (In Full) Hawaii Republican Party	io and address of any pointer		goliat Golianbatione in	on oddin committee.	
Full Name (Last, First, Middle Initial)			Date of Disburseme	ont	
A. Direct Mail Systems Inc.			M M / D D	/ Y Y Y Y Y	
Mailing Address 12450 Automobile Boulevard			06 25	2015	
City S Clearwater	State Zip Code FL 33762-4427		Transaction ID : §	SB21B136759107475e	
Purpose of Disbursement	33/02-442/				
Fundraising: Postage		003	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/ Type		680	
	nent For: Primary General Other (specify) ▼	.,,,,,	,		
Full Name (Last, First, Middle Initial)					
B. FLS Connect LLC			Date of Disburseme	ent	
Mailing Address 7300 Hudson Boulevard N Suite 270			06 25	2015	
Saint Paul	State Zip Code MN 55128-7143		Transaction ID: S	SB21B105279107474e	
Purpose of Disbursement Geoconnect Monthly Support Fee		001	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/ Type		300	
	nent For: Primary General Other (specify) ▼				
Full Name (Last, First, Middle Initial) C. IMS II C			Date of Disburseme	ont .	
C. IMS, LLC			M M / D D	/ Y Y Y Y	
Mailing Address 46-005 Kawa Street Suite 308			06 29	2015	
City S Kaneohe	State Zip Code HI 96744-3838		Transaction ID : S	SB21B105483107476e	
Purpose of Disbursement	90744-3030				
Accounting Candidate Name		001	Amount of Each Dis	sbursement this Period	
Candidate Name		Category/ Type		615.56	
	nent For: Primary General Other (specify) ▼		,		
SUBTOTAL of Disbursements This Page (optional)				1595.56	
TOTAL This Period (last page this line number only)				7852.18	

METHOD OF ALLOCATION FOR:

- ALLOCATED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS
- ALLOCATED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES (State, District and Local Party Committees Only)
- ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE) (Separate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)
Hawaii Republican Party
USE ONLY ONE SECTION, A or B
COL CIVET ONE SECTION, A GI B
A. State and Local Party Committees
Fixed Percentage (select one)
Presidential-Only Election Year (28% Federal)
Presidential and Senate Election Year (36% Federal)
Senate-Only Election Year (21% Federal)
——— Non-Presidential and Non-Senate Election Year (15% Federal)
B. Separate Segregated Funds and Nonconnected Committees
Flat Minimum Federal Percentage
If the committee will allocate using the flat minimum percentage of 50% federal funds, check or
If the committee is spending more than 50% federal funds, indicate ratio below
Federal%
Nonfederal%
This ratio applies to (check all that apply):
Administrative Generic Voter Drive Public Communications Referencing Party Only

SCHEDULE H3 (FEC Form 3X) TRANSFERS FROM NONFEDERAL ACCOUNTS FOR ALLOCATED FEDERAL / NONFEDERAL ACTIVITY

PAGE	19	OF	20
FOR LI	NF 1	8a OF	FORM 3X

AME OF COMMITTEE (In Full) lawaii Republican Party		, <u>.</u>
NAME OF ACCOUNT Hawaii Republican Party - State	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
nawali Republican Party - State	06 04 2015	944.64
BREAKDOWN OF TRANSFER RECEIVED	<u> </u>	
i) Total Administrative		1
		Transaction ID : H3A-42157-50
ii) Generic Voter Drive		
iii) Exempt Activities		
iv) Direct Fundraising (List Activity or Event	t Identifier)	
To breat randraising (List Notivity of Evening		
a)		
b)		
c) Total Amount Transferred For Direct Fu	undraising	
v) Direct Candidate Support (List Activity of	or Event Identifier)	
a)		•
b)		
c) Total Amount Transferred For Direct Ca	andidate Support	
vi) Public Communications Referring Only	to Party (Made by PAC)	
TOTALS	S FOR BREAKDOWN OF TRANSFER RECE	EIVED
TOTAL This Period (Administrative)		944.64
TOTAL This Period (Generic Voter Drive)		0.00
		0.00
FOTAL This Period (Exempt Activities)		0.00
TOTAL This Period (Direct Fundraising)		0.00
		0.00
TOTAL This Period (Direct Candidate Support)		0.00
FOTAL This Period (Public Communications Refe	rring Only to Party)	0.00
THE COURT OF STATE OF THE CONTINUE OF THE COURT OF THE CO	g 2mj to ratty/	
TOTAL This Period (Total Amount Transferred)		. 944.64

SCHEDULE H4 (FEC Form 3X)

DISBURSEMENTS FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

PAGE	20	0	F	20	
FOR	LINE	21a	OF	FORM	зх

NAME OF COMMITTEE (In Full) Hawaii Republican Party Allocated Activity or Event: Full Name (Last, First, Middle Initial) Transaction ID: H4-5-107429-e Central Pacific Bank X Administrative Fundraising Exempt Mailing Address PO Box 135010 Voter Drive Direct Candidate Support City Zip Code State Public Comm (ref to party only) by PAC Honolulu HI 96801-5010 Allocated Activity or Event Year-To-Date Purpose of Disbursement: Mortgage 18668.67 Activity or Event Identifier: Category/ 2015-2016 Administrative 01 Type 06 2015 Date FEDERAL SHARE NONFEDERAL SHARE = TOTAL AMOUNT 944.64 531.36 1476 Allocated Activity or Event: Full Name (Last, First, Middle Initial) Administrative Fundraising Exempt Mailing Address Voter Drive Direct Candidate Support City State Zip Code Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Purpose of Disbursement: Activity or Event Identifier: Category/ Type Date FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT Allocated Activity or Event: Full Name (Last, First, Middle Initial) Administrative Fundraising Exempt Mailing Address Voter Drive Direct Candidate Support City State Zip Code Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Purpose of Disbursement: Activity or Event Identifier: Category/ Type Date FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT SUBTOTAL of Allocated Federal and NonFederal Activity This Page FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT 531.36 944.64 1476.00 TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii)) FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT 531.36 944.64 1476.00